IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:		Carlson et al. Shape Cutting System		CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to:					
Title:									
Prior Appl. No	:	09/769,683	/769,683 Commissioner for Patents, PO Box Virginia 22313-1450.						
Prior Appl. Fil	ing Date:	January 25, 2001		(Express Mail Label Number) (Date of Deposit)					
Examiner:				(Printed Name)					
Art Unit:				(Signature)					
	CO	NTINUING PATENT A TRANSMITTAL L		ION					
Commissioner PO Box 1450	TENT APPLICA for Patents rginia 22313-14								
Sir:									
Transm	nitted herewith t	for filing under 37 C.F.R.	§ 1.53(b) is	s a:					
[X]C	ontinuation [] Division [] Continua	ation-In-Par	t (CIP)					
termination of hereby claimed the above-iden	proceedings had l under 35 U.S. tified prior appl		e above-iden ng application being part of	ntified prior application is on. The entire disclosure of the disclosure of the					
[]	Applicant claims small entity status under 37 CFR 1.27.								
Enclosed are:									
[X]	Specification, Claim(s), and Abstract (25 pages).								
[X]	Formal drawings (5 sheets, Figures 1-8B).								
[X]	Declaration and Power of Attorney (4 pages).								

l J	Assignment of the invention to Alterra Holdings Corporation.
[]	Assignment Recordation Cover Sheet.
[]	Small Entity statement.
[]	Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
[]	Information Disclosure Statement.
[]	Form PTO-1449 with copies of listed reference(s).
[X]	Preliminary Amendment.
[X]	Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below and consists of canceling the original claims and is calculated based upon the claims to be examined in the Preliminary Amendment submitted herewith:

	Claims		Included in	l.	Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee							\$770.00		\$770.00
Total Claims:	20	-	20	=	0	X	\$18.00	=	\$0.00
Independ ents:	5	-	3	=	2	x	\$86.00	=	\$172.00
If any Mu	ltiple Dep	end	ent Claim(s) pr	esent:	+	\$290.00	=	\$0.00
						SU	JBTOTAL:	=	\$942.00
[]	Sm	nall	Entity Fees	Ap	ply (subtra	act ½	of above):	=	\$0.00
TOTAL FILING FEE:								=	\$942.00

- [X] A check in the amount of \$942.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1450. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise

improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1450.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By Mantel Jh

FOLEY & LARDNER Customer Number: 27433

Telephone: (312) 832-4358 Facsimile:

(312) 832-4700

Marshall J. Brown

Attorney for Applicant

Registration No. 44,566